



**TOWN OF AMHERST  
APPLICATION FOR A TAXI DRIVER/CHAUFFEUR  
LICENSE**

To the Local Permit Agent:

Date: 1/13/09

The undersigned hereby applies for a Taxi Driver/Chauffeur License in accordance with the provisions of the Statutes relating thereto:

NAME: Irene H. Tibbets

ADDRESS: 34 Briggs St. 1st Fl.  
Easthampton, MA 01027

TELEPHONE: 413-203-1257

NAME OF COMPANY FOR WHICH YOU WILL BE DRIVING TAXI: Gotta Go Taxi

DATE OF BIRTH: 3-11-51 SOCIAL SECURITY #: 1

HEIGHT: 5 WEIGHT: 170 HAIR: Brown EYES: Brown

DRIVER'S LICENSE #: 1

DATE OF EXPIRATION: 3/11/09

I HAVE NOT BEEN CONVICTED OF A CRIME IN THE LAST FIVE (5) YEARS.

APPLICANT'S SIGNATURE: Irene H. Tibbets

APPROVED/NOT APPROVED: [Signature] Chief of Police Date: 1/16/08

Date Approved/Denied: \_\_\_\_\_ License # \_\_\_\_\_

Remarks: \_\_\_\_\_  
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